

PART B—ISSUE FEE TRANSMITTAL

G INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE. Blocks 2 through 6 should be completed where appropriate. Correspondence including the Issue Fee Receipt, the Patent, advances orders and notification of maintenance fees will be mailed to addressee in Block 1 unless you direct otherwise, by: (a) specifying a new correspondence address in Block below; or (b) providing the PTO with a separate ADDRESS" for maintenance fee notifications with the payment of Issue Fee or thereafter. See reverse for Certificate of Mailing.

CORRESPONDENCE ADDRESS		2. INVENTOR(S) ADDRESS CHANGE (Complete only if there is a change)	
<p style="text-align: center;">MAIL ROOM</p> <p style="text-align: center;">89 NOV 24 1993 PAT. & TRADEMARK OFF.</p> <p style="text-align: center;">12N1/0826</p> 		INVENTOR'S NAME [Handwritten Name] 11/16/93 Street Address 1111 DEER, (City, State and ZIP Code) CO-INVENTOR'S NAME Street Address 1111 DEER, City, State and ZIP Code	
<input type="checkbox"/> Check if additional changes are on reverse side			
SERIES CODE/SERIAL NO.	FILING DATE	TOTAL CLAIMS	EXAMINER AND GROUP ART UNIT
07/827, 187	01/26/93	006	CHANG, C 11-16-15
			DATE MAILED 1203 08/26/93
First Named Applicant BAKER,	RAYMOND		
TITLE OF INVENTION TRIAZOLE CONTAINING INDOLE DERIVATIVES (AS AMENDED)			
(Title begins here) (Title begins here)			
ATTY'S DOCKET NO.	CLASS-SUBCLASS	BATCH NO.	APPLN. TYPE
T-1092Y	514-383.000	Q07	UTILITY NO.
			FEES DUE \$1,170.00
DATE DUE 11/26/93			
Correspondence address change (Complete only if there is a change) Robert J. North			
4. For printing on the patent front The name of the assignee may be printed more than once. If the assignee is a corporation, the name of a registered agent or attorney, or the name of a registered agent or attorney, the name is listed, it may be printed.			
Robert J. North			
DO NOT USE THIS SPACE			
DS20420 12/01/93 07827187 13-2755-020 561 1,170.00CH DS20421 12/01/93 07827187 13-2755-020 561 45.00CH			
ASSIGNMENT DATA TO BE PRINTED ON THE PATENT (print or type)			
(1) NAME OF ASSIGNEE: Merck Sharp & Dohme Limited			
(2) ADDRESS: (CITY & STATE OR COUNTY) Hertfordshire, ENGLAND			
(3) STATE OF INCORPORATION, IF ASSIGNEE IS A CORPORATION ENGLAND			
<input type="checkbox"/> This application is NOT assigned. <input type="checkbox"/> Assignment is being previously submitted to the Patent and Trademark Office. <input checked="" type="checkbox"/> Assignment is being submitted under separate cover. Assignments should be directed to Box ASSIGNMENTS.			
PLEASE NOTE: Unless an assignee is identified in Block 5, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the PTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.			
6a. The following fees are enclosed: <input type="checkbox"/> Issue Fee <input type="checkbox"/> Advanced Order - # of Copies _____			
6b. The following fees should be charged to: DEPOSIT ACCOUNT NUMBER 13-2755 <input type="checkbox"/> Issue Fee <input type="checkbox"/> Advanced Order - # of Copies 15- <input type="checkbox"/> Any Deficiencies in Enclosed Fees _____ (Minimum of 10)			
The COMMISSIONER OF PATENTS AND TRADEMARKS is requested to apply the Issue Fee to the application identified above. (Signature of party in interest of record)			
NOTE: The Issue Fee will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the Patent and Trademark Office.			

TRANSMIT THIS FORM WITH FEE-CERTIFICATE OF MAILING ON REVERSE